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Substitute for form 1449A&B/PTO				Complete if Known		
				Application Number	09/553,969	
INFO	INFORMATION DISCLOSURE				April 21, 2000	
STATEMENT BY APPLICANT (Use as many sheets as necessary)				First Named Inventor	WALLACE, DONALD G.	
				Art Unit	1611	
				Examiner Name	CHANNAVAJJALA, Lakshmi Sarada	
Sheet	1	of	1	Attorney Docket Number	017067-002040US	

U.S. PATENT DOCUMENTS						
Examiner Initials*	Cite No.1	Document Number	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant	
iiiidalo		Number Kind Code ^{2 (if known)}		, the second sec	Figures Appear	
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Examiner Initials*	Cite No. ¹	Fo Country Code ³	reign Patent Do	ocument Kind Code ⁵ (<i>if known</i>)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T ⁶
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NON PATENT LITERATURE DOCUMENTS						
Examiner Initials *	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T²			
	AD					

Examiner Signature	/Lakshmi Channavajjala/	Date Considered	09/13/2008

EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

Applicant's unique citation designation number (optional). Applicant is to place a check mark here if English language Translation is attached.